

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: Livonia Housing Commission PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): 01/01/2010 PHA Code: MI055					
<b>2.0</b>	<b>Inventory (based on ACC units at time of FY beginning in 1.0 above)</b> Number of PH units: 151 Number of HCV units: 909					
<b>3.0</b>	<b>Submission Type</b> <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
<b>4.0</b>	<b>PIHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
					PH	HCV
	PHA 1:					
	PHA 2:					
	PHA 3:					
<b>5.0</b>	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.					
<b>5.1</b>	<b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: <i>The mission of the Livonia Housing Commission is to provide adequate housing and community development assistance, and to expand and preserve decent, safe and affordable housing for low and moderate income families. The Commission is further committed to providing quality services to our clients in an effective, efficient and respectful manner.</i>					
<b>5.2</b>	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. <b>GOALS STATED IN 2005-2009 AGENCY PLAN</b> <b>GOAL #1:</b> Achieve and maintain at a minimum a standard performer under Public Housing Assessment System (PHAS) and the Section 8 Management System (SEMAP): <i>The Livonia Housing Commission has achieved and maintained a high performer status for the Public Housing and Section 8 Voucher programs as of 12/31/08.</i> <b>GOAL #2:</b> Improve the physical environment of Public Housing. <i>The Public Housing properties currently have a physical inspection score greater than 90% based on HUD REAC physical inspection standards.</i> <b>GOAL #3:</b> Expand the supply of affordable housing for families, elderly and disabled. <i>The Housing Commission participated in the section 8 Opt-out initiative and has increased the supply of affordable housing through the Section 8 Voucher program which is currently 909 Vouchers.</i> <b>GOAL #4:</b> The Housing Commission shall expand financial resources and maintain fiscal independence from the City of Livonia. <i>The Housing Commission remains financially viable and does not receive any financial assistance from the City of Livonia. Further, the public housing and section 8 voucher and new construction programs have adequate reserves for ongoing administration.</i> <b>GOAL #5:</b> Establish a Homeownership Program for scattered site Public Housing. <i>The Commission will focus more closely in this initiative. Currently, the Commission is acquiring foreclosed homes in Livonia through the neighborhood Stabilization Program and will be offering the home for re-sale in 2010. The Commission will also adopt a Homeownership Program to sell other CDBG single family homes and scattered site public housing homes.</i> <b>GOAL #6:</b> Extend the Public Housing Designated Housing Plan for Michigan #55-1 and #55-2. <i>The Commission requested and HUD approved an extension to the Designated Housing Plan. The current plan expires December 17, 2009 and the Commission intends to request an additional two year extension.</i>					
<b>6.0</b>	<b>PIHA Plan Update</b> (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <i>Section 8 Administrative Plan</i> (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. Livonia Housing Commission 19300 Purlingbrook Livonia, MI 48152					
<b>7.0</b>	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> Include statements related to these programs as applicable. <b>NOT APPLICABLE</b>					

8.0	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable. Please see capital fund obligation/expenditure statements for the 2006, 2007, 2008, 2009, 2009 ARRA and 2010 capital fund grants. Also attached are the 2010-2014 five year capital funds.
8.1	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing. Please see obligation and expenditure reports for all open Capital Fund grants.
8.2	<b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. <i>Please see enclosure</i>
8.3	<b>Capital Fund Financing Program (CFFP).</b> <input checked="" type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements. CFFP Fannie Mae Loan closed in 2007 in the amount of \$615,726.39. Expenditure deadline is June 2011.
9.0	<b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. The Livonia Housing Commission administers the City of Livonia Community Development Block Grant (CDBG) program and prepares the Consolidated Plan for approval by HUD. The current CDBG Consolidated Plan is for the period 2005 through 2010 and the housing needs and strategies to address those needs are attached to this Agency Plan. See pages 40-68 of the Consolidated Plan for housing needs/strategies.
9.1	<b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. See above narrative in Section 9.0 as to CDBG Consolidated Plan citation.
10.0	<b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.  (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan. <i>Please see section 5.2 as to progress in meeting goals.</i> (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" To be submitted only with 5-year plan. <i>"Substantial deviations or significant amendments or modifications are defined as discretionary changes in the plans or policies of the Housing Commission that fundamentally change the mission, goals, objectives or plans of the agency and which require formal approval of the Board of Commissioners."</i> (c) <i>Please see attachment relative to the Violence Against Women Act (VAWA)</i> (d) <i>Please be advised the Commission conducted a public hearing on September 29, 2009 and there were no comments from the general public or residents of Public Housing on the Annual and Five Year Agency Plan Further, the Resident Advisory Board offered no additional recommendations on the proposed Annual 2010 Agency Plan and Five-Year Plan 2010-2014</i>
11.0	<b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.  (a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. (g) Challenged Elements (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)

## ATTACHMENT #9

### VIOLENCE AGAINST WOMEN ACT (VAWA)

The VAWA statute and Federal Register dated March 16, 2007 entitled "The Violence Against Women and Department of Justice Reauthorization Act of 2005: Applicability to HUD Programs, page 12697 A., "Public Housing Agency Plans" stipulates that the PHA include in the annual plan a description as activities, services or programs to be offered by an agency, either directly or in partnership with other service providers towards child or adult victims of domestic violence, dating violence, sexual assault or stalking.

The Livonia Housing Commission administers the HUD Community Development Block Grant (CDBG) program. Through the Public Service initiative the Commission entered into a contract (\$4,750.00) dated July 1, 2007 with FIRST STEP, the Western Wayne County Project on Domestic Assault to provide victim assistance to low income Livonia residents including residents of Public Housing and the Voucher Housing Assistance Program. FIRST STEP based on previous contracts will be able to assist approximately 50 low income families. Services and programs include:

- A) 24 hour crisis line for all Livonia residents;
- B) Counseling aimed at investigating and solving immediate problems and locating available options. Support group assistance is also provided.
- C) Referral, advocacy in the areas of legal and financial problems, permanent housing assistance, childcare and transportation.
- D) Educational presentations to high schools, community groups and public housing families regarding prevention and options provided through a Speakers Bureau.

The FIRST STEP organization will be a valuable partner in providing services and counseling to Housing Commission clients.

JAMES M. INGLIS  
Executive Director

Annual Statement/Performance and Evaluation Report  
Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
Expires 4/30/2011

<b>Part I: Summary</b>					
PHA Name: Livonia Housing Commission		Grant Type and Number Capital Fund Program Grant No: M128P05550106 Replacement Housing Factor Grant No: Date of CFP:		FFY of Grant: 2006 FFY of Grant Approval:	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2009 <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Original	Total Estimated Cost	Obligated	Total Actual Cost <sup>1</sup>
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	0	0	0	0
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	0	610.88	56,315.00	58,183.56
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	50,361.00	50,361.00	0	0
11	1465.1 Dwelling Equipment—Nonexpendable	15,000.00	15,000.00	15,665.00	15,665.00
12	1470 Non-dwelling Structures	15,000.00	15,000.00	0	0
13	1475 Non-dwelling Equipment	40,000.00	40,000.00	48,991.88	0
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
Expires 4/30/2011

Part I: Summary

PHA Name: Livonia Housing Commission	Grant Type and Number Capital Fund Program Grant No: MD8P055500106 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2006 FFY of Grant Approval:
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<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009		<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	53,300.00	52,689.12
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	173,661.00	173,661.00
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director		Date	Signature of Public Housing Director
		10-15-09	
			Date

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFF Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
Expires 4/30/2011

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
Expires 4/30/2011

PHA Name: Livonia Housing Commission

**Federal FY of Grant: 2006**[illegible]

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report  
Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
Expires 4/30/2011

Part I: Summary

PHA Name: Livonia Housing Commission	Grant Type and Number Capital Fund Program Grant No: MZ8P055501072007 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2007 FFY of Grant Approval:
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Type of Grant		Revised Annual Statement (revision no: )	
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Final Performance and Evaluation Report	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009			
Line	Summary by Development Account	Original	Total Estimated Cost
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		
3	1408 Management Improvements		
4	1410 Administration (may not exceed 10% of line 21)		
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs	20,000.00	20,000.00
8	1440 Site Acquisition		
9	1450 Site Improvement		
10	1460 Dwelling Structures	96,046.88	96,046.88
11	1465.1 Dwelling Equipment—Nonexpendable		
12	1470 Non-dwelling Structures		
13	1475 Non-dwelling Equipment		
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities <sup>4</sup>		

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.



Annual Statement/Performance and Evaluation Report  
Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
Expires 4/30/2011

Part I: Summary

PHA Name: Livonia Housing Commission	Grant Type and Number Capital Fund Program Grant No: MD8P05550107 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2007 FFY of Grant Approval:
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Type of Grant

☐ Original Annual Statement ☐ Reserve for Disaster/Emergencies

☒ Performance and Evaluation Report for Period Ending: 9/30/2009

☐ Revised Annual Statement (revision no: )

☐ Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>
18a	1501 Collateralization or Debt Service paid by the PHA		Obligated
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	52,689.12	52,689.12
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	168,736.00	168,736.00
21	Amount of line 20 Related to LBP Activities		112,474.84
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director <i>Jan M. [Signature]</i> Date <i>10-15-09</i>		Signature of Public Housing Director	
		Date	

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFF Grants for operations.

<sup>4</sup> RHF funds shall be included here.

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
Expires 4/30/2011

[illegible]

<sup>2</sup>To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
Expires 4/30/2011

PHA Name: Livonia Housing Commission

Federal FY of Grant: 2007

[illegible]

Pages

Annual Statement/Performance and Evaluation Report  
Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
Expires 4/30/2011

<b>Part I: Summary</b>					
PHA Name: Livonia Housing Commission		Grant Type and Number Capital Fund Program Grant No: MD28P05550108 Replacement Housing Factor Grant No: Date of CFP:		FFY of Grant: 2008 FFY of Grant Approval:	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009 <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Original	Total Estimated Cost Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup> Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	25,405.88		0	0
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	0		0	0
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	75,000.00		0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	25,000.00		8,669.00	8,669.00
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
Expires 4/30/2011

Part I: Summary

PHA Name: Livonia Housing Commission	Grant Type and Number Capital Fund Program Grant No: M128P05550108 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2008 FFY of Grant Approval:
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Type of Grant  
☒ Original Annual Statement ☐ Reserve for Disasters/Emergencies

☒ Performance and Evaluation Report for Period Ending: 9/30/2009 ☐ Revised Annual Statement (revision no: )  
☐ Final Performance and Evaluation Report

Line	Summary by Development Account	Original	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
18a	1501 Collateralization or Debt Service paid by the PHA						
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	52,689.12			52,689.12	0	
19	1502 Contingency (may not exceed 8% of line 20)						
20	Amount of Annual Grant: (sum of lines 2 - 19)	178,095.00			61,358.12	8,669.00	
21	Amount of line 20 Related to LBP Activities						
22	Amount of line 20 Related to Section 504 Activities						
23	Amount of line 20 Related to Security - Soft Costs						
24	Amount of line 20 Related to Security - Hard Costs						
25	Amount of line 20 Related to Energy Conservation Measures						
Signature of Executive Director <i>James M. [Signature]</i>		Date 10-15-09	Signature of Public Housing Director		Date		

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

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Expires 4/30/2011

## PHA Name: Livonia Housing Commission

Capital Fund Program Grant No: M128P05550108

## Federal FY of Grant: 2008

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

U.S. Department of Housing and Urban Development  
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Expires 4/30/2011

PHA Name: Livonia Housing Commission

**Federal FY of Grant: 2008**

[illegible]

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report  
Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
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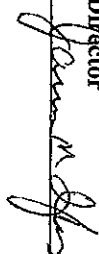
<b>Part I: Summary</b>						<b>FFY of Grant: 2009</b>	
<b>PHA Name:</b> Livonia Housing Commission		<b>Grant Type and Number</b> Capital Fund Program Grant No: MID8P05550109 Replacement Housing Factor Grant No: Date of CFFP:				<b>FFY of Grant Approval:</b>	
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009		<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Final Performance and Evaluation Report					
<b>Line</b>	<b>Summary by Development Account</b>	<b>Original</b>	<b>Total Estimated Cost</b>	<b>Revised<sup>2</sup></b>	<b>Obligated</b>	<b>Total Actual Cost<sup>1</sup></b>	<b>Expended</b>
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>						
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement	25,000.00			0	0	
10	1460 Dwelling Structures	50,000.00			0	0	
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment						
14	1485 Demolition	52,310.88			0	0	
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities <sup>4</sup>						

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
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<b>Part I: Summary</b>		<b>FFY of Grant: 2009</b>	
<b>PHA Name:</b> Livonia Housing Commission		<b>Grant Type and Number:</b> Capital Fund Program Grant No: M128P05550109 Replacement Housing Factor Grant No: Date of CFFP:	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009 <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report			
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>	<b>Total Actual Cost<sup>1</sup></b>
		<b>Original</b>	<b>Revised<sup>2</sup></b>
18a	1501 Collateralization or Debt Service paid by the PHA	52,689.12	0
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		0
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	180,000.00	0
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
<b>Signature of Executive Director</b> 		<b>Date</b> 10-15-07	<b>Signature of Public Housing Director</b>  
			<b>Date</b>

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

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OMB No. 2577-0226  
Expires 4/30/2011

PHA Name: Livonia Housing Commission

Capital Fund Program Grant No: P05550109  
CFFP (Yes/ No):  
Replacement Housing Factor Grant No:

## Federal FY of Grant: 2009

[illegible]

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
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**Federal FFY of Grant: 2009**[illegible]

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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Capital Fund Financing Program

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Expires 4/30/2011

Part I: Summary

PHA Name: Livonia Housing Commission		Grant Type and Number Capital Fund Program Grant No: M128P05550110 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2010 FFY of Grant Approval:	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Summary by Development Account <input type="checkbox"/> Final Performance and Evaluation Report					
Line		Original	Total Estimated Cost Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup> Expended
1	Total non-CFF Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	5,000.00		0	0
8	1440 Site Acquisition				
9	1450 Site Improvement	77,310.88		0	0
10	1460 Dwelling Structures	40,000.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFF Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

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U.S. Department of Housing and Urban Development  
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Part I: Summary

PHA Name: Livonia Housing Commission	Grant Type and Number Capital Fund Program Grant No: MD28P05550110 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2010 FFY of Grant Approval:
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<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009 <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report							
Line	Summary by Development Account	Original	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
18a	1501 Collateralization or Debt Service paid by the PHA						
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	52,689.12		0		0	
19	1502 Contingency (may not exceed 8% of line 20)						
20	Amount of Annual Grant: (sum of lines 2 - 19)	175,000.00		0		0	
21	Amount of line 20 Related to LBP Activities						
22	Amount of line 20 Related to Section 504 Activities						
23	Amount of line 20 Related to Security - Soft Costs						
24	Amount of line 20 Related to Security - Hard Costs						
25	Amount of line 20 Related to Energy Conservation Measures						
Signature of Executive Director		Date	Signature of Public Housing Director		Date		

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFF Grants for operations.

<sup>4</sup> RHF funds shall be included here.

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[illegible]

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Expires 4/30/2011

PHA Name: Livonia Housing Commission

Federal FFY of Grant: 2010

[illegible]

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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Part I: Summary

PHA Name: Livonia Housing Commission	Grant Type and Number Capital Fund Program Grant No: MD8S05550109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval:
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Type of Grant		Type of Grant		Type of Grant		Type of Grant	
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )		<input type="checkbox"/> Final Performance and Evaluation Report	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009							
Line	Summary by Development Account	Original	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>						
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement	45,433.00			0	0	
10	1460 Dwelling Structures	150,000.00			150,000.00	23,108.00	
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment	30,000.00			0	0	
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities <sup>4</sup>						

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.


<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.



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<b>Part I: Summary</b>				<b>FFY of Grant: 2009</b>			
<b>PHA Name:</b> Livonia Housing Commission		<b>Grant Type and Number</b> Capital Fund Program Grant No: M12SS05550109 Replacement Housing Factor Grant No: Date of CFFP:		<b>FFY of Grant Approval:</b> 			
<input type="checkbox"/> <b>Type of Grant</b> <input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b> <input checked="" type="checkbox"/> <b>Performance and Evaluation Report for Period Ending: 9/30/2009</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>							
<b>Line</b>	<b>Summary by Development Account</b>	<b>Original</b>	<b>Total Estimated Cost</b>	<b>Revised<sup>2</sup></b>	<b>Obligated</b>	<b>Total Actual Cost<sup>1</sup></b>	<b>Expended</b>
18a	1501 Collateralization or Debt Service paid by the PHA						
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment						
19	1502 Contingency (may not exceed 8% of line 20)						
20	Amount of Annual Grant: (sum of lines 2 - 19)		225,433.00		150,000.00		23,108.00
21	Amount of line 20 Related to LBP Activities						
22	Amount of line 20 Related to Section 504 Activities						
23	Amount of line 20 Related to Security - Soft Costs						
24	Amount of line 20 Related to Security - Hard Costs						
25	Amount of line 20 Related to Energy Conservation Measures						
<b>Signature of Executive Director</b> 		<b>Date</b> 10-15-09		<b>Signature of Public Housing Director</b>		<b>Date</b>	

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

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<b>Part I: Summary</b>		<b>PHA Name:</b> Livonia Housing Commission		<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:		<b>FFY of Grant: 2007 CFFP</b> FFY of Grant Approval:	
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009		<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report					
<b>Line</b>	<b>Summary by Development Account</b>	<b>Original</b>	<b>Total Estimated Cost</b>	<b>Revised<sup>1</sup></b>	<b>Obligated</b>	<b>Total Actual Cost<sup>1</sup></b>	<b>Expended</b>
1	Total non-CFF Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>2</sup>						
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition	13,793.00	19,770.46		19,770.46	19,770.46	
9	1450 Site Improvement	30,000.00	30,000.00		25,340.00	25,000.00	
10	1460 Dwelling Structures	447,000.00	447,000.00		442,170.00	130,660.30	
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment	114,000.00	114,000.00		92,356.00	92,356.00	
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities <sup>4</sup>						

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFF Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

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<b>Part I: Summary</b>		PHA Name: Livonia Housing Commission		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2007 CFFP FFY of Grant Approval:	
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009		<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Original	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	34,948.00	35,255.61		35,255.61	35,255.61	
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment						
19	1502 Contingency (may not exceed 8% of line 20)	20,694.00	14,408.93		14,408.93	0	
20	Amount of Annual Grant: (sum of lines 2 - 19)	660,435.00	660,435.00		609,301.00	303,042.37	
21	Amount of line 20 Related to LBP Activities						
22	Amount of line 20 Related to Section 504 Activities						
23	Amount of line 20 Related to Security - Soft Costs						
24	Amount of line 20 Related to Security - Hard Costs						
25	Amount of line 20 Related to Energy Conservation Measures						
Signature of Executive Director		Date		Signature of Public Housing Director		Date	
<i>[Signature]</i>		10-15-09					

<sup>1</sup> To be completed for the Performance and Evaluation Report

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFF Grants for operations.

<sup>4</sup> RHF funds shall be included here.

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Part II: Supporting Pages								
PHA Name: Livonia Housing Commission			Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Yes Replacement Housing Factor Grant No:		Federal FFY of Grant: 2007 CFFP			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA Wide	CFFP Fees/Costs	1430		13,793.00	19,770.46	19,770.46	19,770.46	completed
MI 55-1	Remove and replace existing bathroom vanities, sinks, faucets, shower enclosures and install new vanities and shower enclosures/tile, paint bathrooms.	1460	51	91,000.00	91,000.00	91,000.00	0	under construction
MI 55-1	Remove and replace two existing commercial domestic hot water heating tanks. Existing HWT's require excessive maintenance and failure could result in building flood.	1475	2	20,000.00	20,000.00	9,000.00	9,000.00	completed
MI 55-2	Remove and replace two existing commercial domestic hot water heating tanks	1475	2	20,000.00	20,000.00	9,000.00	9,000.00	completed
MI 55-2	Remove and replace existing bathroom vanities, sinks, faucets, shower enclosures and install new vanities and shower enclosures/tile, paint bathrooms.	1460	81	110,000.00	110,000.00	110,000.00	0	under construction
MI 55-2	Remove and replace two A/C and Heating community room roof units (1999) and two main roof air handler units (1993) due to excess maintenance and operational costs.	1475	4	74,000.00	74,000.00	74,356.00	74,356.00	completed
MI 55-2	Remove and replace apartment entry, interior bedroom and bathroom doors	1460	243	75,000.00	75,000.00	75,000.00	0	under construction
MI 55-4	Renovation and upgrades to bathrooms (shower/tub tile/ vanities), kitchens (countertops, cabinets) kitchen/bathroom plumbing (sinks/faucets) , kitchen/bath painting,	1460	15	100,000.00	100,000.00	110,170.00	85,660.00	under construction 95% complete







